State Military Department State Inspector General Action Request

Print this form - When completed, mail it to: State IG, 9800 Goethe Road, Sacramento, CA 95827

CMVC, Section 101; Title 10, USC, Section 3039; and, Army Regulation 20-1

Authority:

Principal Purpose: To secure sufficient information to make inquiry into the matters presented and to provide a response to the requestor(s) and/or take actions to correct deficiencies. Routine Uses: Information is used for official purposes within the State Military Department; to answer complaints or respond to requests for assistance or information; by elected officials and other government agencies when, determined by the State Inspector General, to be in the best interest of the State Military Department; and, in certain cases, in other State Military Department matters as authorized by the California Military and Veterans Code (CMVC). For use of this form, see AR 20-1 and CMVC Section 101 Last Name - First Name - Middle Name Grade **Duty Telephone** Complete Address (including Zip Code): Where You Work In the State Military Department: Specific Action Requested: Information Pertaining to This Request (Use additional sheets if necessary; list enclosures if applicable): This information is submitted for the basic purpose of requesting assistance, correcting injustices, or eliminating conditions considered detrimental to the efficiency or reputation of the State Military Department. I fully understand that I may be held accountable for any statements which are proved to be knowingly untruthful. Date: Signature